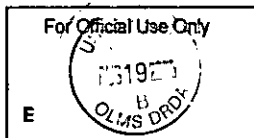


FORM LM-30

LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C. 439 or 440.



READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

1. File Number U - <u>17025</u>	2. Fiscal Year Covered From: <u>1 / 1 / 2004</u> Through: <u>12 / 31 / 2004</u>
3. Name and address of person filing. Name <u>Reuben M Bautista</u> P.O. Box, Bldg., Room No., if any Street <u>1690 Doral Drive</u> City <u>Pasadena</u> State <u>California</u> ZIP Code + 4 <u>91784</u>	4. Name, file number, and address of labor organization. Name <u>United Assoc. Local Union 345</u> Labor Organization File Number <u>063-064</u> P.O. Box, Building and Room Number, if any Street <u>142 W. Pomona Ave</u> City <u>Mona Vista</u> State <u>California</u> ZIP Code + 4 <u>91016</u>
5. Position in labor organization. <u>Business mgr - Fin. Secy - Treas.</u>	

Enter appropriate data below if, during the past fiscal year, you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions):

A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.	
6. Name and address of Employer (including trade name, if any). Name Trade Name, if any: P.O. Box, Bldg., Room No., if any Street City State ZIP Code + 4	7.a. Nature of Interest, Transaction, or Income. 7.b. Amount.

Signature

15. Signature and verification. The undersigned declares, under penalty of Perjury and other applicable penalties of the law, that all of the information submitted in this report (including the information contained in any accompanying documents), has been examined by the signatory and is, to the best of the undersigned's knowledge and belief, true, correct, and complete. (See the section on penalties in the instructions.)

Signed Reuben Bautista

On 8-11-05
Date

909 - 949-0952
Telephone Number

Name of Person Filing Reuben M. Bautista	File Number U-
---	----------------

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

<p>8. Name and address of Business (including trade name, if any).</p> <p>Name So. Calif Pipe Trades Ass. Corp.</p> <p>Trade Name, if any: Plumbers & Pipefitters</p> <p>P.O. Box, Bldg., Room No., if any 5th Floor</p> <p>Street 501 Shatto Place</p> <p>City Los Angeles</p> <p>State California ZIP Code + 4 90020</p>	<p>9. Business deals with:</p> <p><input checked="" type="checkbox"/> a. Labor Organization</p> <p>b. Trust</p> <p>c. Employer</p>
<p>10. If 9.b. or 9.c. is checked give trust or employer's name.</p> <p>Name</p> <p>Trade Name, if any:</p> <p>P.O. Box, Bldg., Room No., if any</p> <p>Street</p> <p>City</p> <p>State ZIP Code + 4</p>	<p>11.a. Nature of such dealing.</p> <p>Taft - Hartley Multi Employer Trust Fund Administers Benefits for Plan Participants</p>
	<p>11.b. Approximate dollar value of such dealing.</p>
	<p>12.a. Nature of interest held or income received.</p> <p>Meals provided while attending trust fund meetings</p>
	<p>12.b. Amount. \$ 70.</p>

<p>C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.</p>	
<p>13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).</p> <p>Name</p> <p>Trade Name, if any:</p> <p>P.O. Box, Bldg., Room No., if any</p> <p>Street</p> <p>City</p> <p>State ZIP Code + 4</p>	<p>14.a. Nature of payment.</p>
<p>13.b. Is the Business an Employer or Consultant ?</p>	<p>14.b. Amount of payment.</p>

Name of Person Filing Reuben M. Bautista	File Number U-
---	----------------

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name and address of Business (including trade name, if any).

Name **National Insp. Testing & Cret. Corp**
 Trade Name, if any: **N.I.T.C.**
 P.O. Box, Bldg., Room No., if any **Suite 201**
 Street **501 Shatto Place**
 City **Los Angeles**
 State **California** ZIP Code + 4 **90020**

9. Business deals with:

- ☒ a. Labor Organization
 b. Trust
 c. Employer

10. If 9.b. or 9.c. is checked give trust or employer's name.

Name
 Trade Name, if any:
 P.O. Box, Bldg., Room No., if any
 Street
 City
 State ZIP Code + 4

11.a. Nature of such dealing.

TRUST established to provide certification of craft workers

11.b. Approximate dollar value of such dealing.

12.a. Nature of interest had or income received.

Lodging expense - Shirts & gift of Sunglasses provided to me while I attended meeting for my Employer. ~~Gift~~

12.b. Amount.

\$ 1,062.-

C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.

13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).

Name
 Trade Name, if any:
 P.O. Box, Bldg., Room No., if any
 Street
 City
 State ZIP Code + 4

14.a. Nature of payment.

13.b. Is the Business an Employer or Consultant ?

14.b. Amount of payment.

Name of Person Filing Reuben M. Bautista	File Number U-
---	----------------

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name and address of Business (including trade name, if any).

Name **International Pipe Trades Joint Tenq. Committee**

Trade Name, if any:

P.O. Box, Bldg., Room No., if any **2nd Floor**

Street **901 Massachusetts Ave. NW.**

City **Washington**

State **D.C.** ZIP Code + 4 **20001**

9. Business deals with:

☒ a. Labor Organization

b. Trust

c. Employer

10. If 9.b. or 9.c. is checked give trust or employer's name.

Name

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street

City

State ZIP Code + 4

11.a. Nature of such dealing.

Int. Nat'l Multi Employee Trust for the purpose of providing education & other benefits. Provides grants to Local Unions for Training & Education.

11.b. Approximate dollar value of such dealing.

12.a. Nature of interest had or income received.

Business Dinner after the ITF Training Conference (includes wife)

12.b. Amount.

\$ 348.

C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.

13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).

Name

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street

City

State ZIP Code + 4

14.a. Nature of payment.

13.b. Is the Business an Employer or Consultant ?

14.b. Amount of payment.